

As Introduced

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H. B. No. 435

Representative Crawley

Cosponsors: Representatives Boyd, Howse, Russo, Kelly, Lepore-Hagan, Hicks-Hudson, Lightbody, Brent, West, Miller, A., Miranda, Leland, Crossman, Boggs, Sobecki, Blair

A BILL

To enact sections 3702.35, 3702.36, and 3738.20 of
the Revised Code to enact the "Save Our Mothers
Act" for the purpose of establishing continuing
education requirements for birthing facility
personnel and an initiative to improve birth
equity, reduce peripartum racial and ethnic
disparities, and address implicit bias in the
healthcare system.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 3702.35, 3702.36, and 3738.20 of
the Revised Code be enacted to read as follows:

Sec. 3702.35. (A) As used in this section and section
3702.36 of the Revised Code:

(1) "Freestanding birthing center" means any facility in
which deliveries routinely occur, regardless of whether the
facility is located on the campus of another health care
facility, and which is not licensed under Chapter 3711. of the

Revised Code as a level one, two, or three maternity unit or a 17
limited maternity unit. 18

(2) "Hospital" means a hospital registered with the 19
department of health under section 3701.07 of the Revised Code. 20

(B) The director of health shall adopt rules establishing 21
requirements for hospitals and freestanding birthing centers to 22
conduct annual continuing education for employees and 23
contractors who routinely care for pregnant and postpartum 24
women, including employees and contractors of the facility's 25
emergency department. In establishing the requirements, the 26
director may consult with the American college of obstetricians 27
and gynecologists and other professional associations concerned 28
with the care of pregnant and postpartum women. 29

Among the requirements shall be a requirement that each 30
hospital and freestanding birthing center provide its employees 31
and contractors educational modules on each of the following in 32
accordance with acceptable and prevailing standards of care: 33

(1) Severe maternal hypertension; 34

(2) Obstetric hemorrhage; 35

(3) The two most prevalent obstetric complications, other 36
than those specified in divisions (B) (1) and (2) of this 37
section, as identified in the most recent biennial report 38
prepared under section 3738.08 of the Revised Code by the 39
pregnancy-associated mortality review (PAMR) board established 40
under section 3738.01 of the Revised Code. 41

The modules shall be updated and provided not less than 42
annually. The director shall require that hospitals and 43
freestanding birthing centers apply to the appropriate 44
professional licensing boards to have each educational module 45

approved for continuing education credit. 46

(C) All rules adopted under division (B) of this section 47
shall be adopted in accordance with Chapter 119. of the Revised 48
Code. 49

Sec. 3702.36. The director of health shall monitor the 50
compliance of hospitals and freestanding birthing centers with 51
the requirements regarding continuing education established in 52
rules adopted under section 3702.35 of the Revised Code. To that 53
end, the director may inspect the records of any hospital or 54
freestanding birthing center and require that each hospital and 55
freestanding birthing center issue reports on the continuing 56
education activities it has conducted. 57

Sec. 3738.20. (A) As used in this section: 58

(1) "Freestanding birthing center" means any facility in 59
which deliveries routinely occur, regardless of whether the 60
facility is located on the campus of another health care 61
facility, and which is not licensed under Chapter 3711. of the 62
Revised Code as a level one, two, or three maternity unit or a 63
limited maternity unit. 64

(2) "Hospital" means a hospital registered with the 65
department of health under section 3701.07 of the Revised Code. 66

(3) "Telemedicine services" has the same meaning as in 67
section 3902.30 of the Revised Code. 68

(B) The department of health shall collaborate with the 69
Ohio perinatal quality collaborative or its successor to develop 70
an initiative to improve birth equity, reduce peripartum racial 71
and ethnic disparities, and address implicit bias in the health 72
care system. In developing the initiative, the department and 73
Ohio perinatal quality collaborative shall consider existing 74

programs, including those administered or supported by the 75
alliance for innovation on maternal health and the Ohio equity 76
institute. The department shall ensure that the initiative 77
includes the development of best practices for implicit bias 78
training and education in cultural competency to be used by 79
hospitals and freestanding birthing centers in interactions 80
between patients and health care providers. 81

(C) The department of health, in collaboration with the 82
pregnancy-associated mortality review (PAMR) board established 83
under section 3738.01 of the Revised Code, shall make available 84
to all hospitals and freestanding birthing centers best 85
practices for the timely identification of all pregnant and 86
postpartum women in the emergency department and for the 87
appropriate and timely consultation with an obstetrician, 88
certified nurse-midwife, or physician assistant with obstetric 89
expertise to provide input on patient management and follow-up. 90
A hospital or freestanding birthing center may use telemedicine 91
services for the consultation. 92

(D) The director of health may adopt rules in accordance 93
with Chapter 119. of the Revised Code as necessary to implement 94
this section. 95

Section 2. This act shall be known as the "Save Our 96
Mothers Act." 97